



CITY OF LODI

COUNCIL COMMUNICATION

AGENDA TITLE: Communications (January 12, 1995 through January 25, 1995)

MEETING DATE: February 1, 1995

PREPARED BY: City Clerk


RECOMMENDED ACTION: No action - information only.

BACKGROUND INFORMATION: Copies of applications for Alcoholic Beverage Control Licenses have been received from the State of California Department of Alcoholic Beverage Control for the following:

- a) Niata, Inc. (The Opera House, Tracy) to Marlo Kerner & Associates, Inc., Hazel's, 28 South School Street, Lodi, On Sale General Eating Place, Person to Person and Premises to Premises Transfer

28 South School Street is zoned C-2, General Commercial. This is an appropriate zoning for this type of Alcoholic Beverage Control license.

FUNDING: None required.


Jennifer M. Perrin
City Clerk

JMP
Attachments

APPROVED: _____



THOMAS A. PETERSON
City Manager



recycled paper



RECEIVED

95 JAN 16 PM 1:25

APPLICATION FOR ALCOHOL BEVERAGE LICENSE(S)

TO:

Department of Alcoholic Beverage Control
31 East Channel Street, Room 168
P.O. Drawer 150
Stockton, CA 95201
(209) 948-7739

File Number.....**304905**
Receipt Number.....**1017497**
Geographical Code.....**3902**
Copies Mailed Date
Issued Date

DISTRICT SERVING LOCATION:

STOCKTON

Name of Business:

HAZELS

Location of Business:

Number and Street
City, State Zip Code
County

28 S SCHOOL ST
LODI CA 95240
SAN JOAQUIN
YES

Is premise inside city limits?

Mailing Address:

(If different from
premise address)

28 S SCHOOL ST
LODI CA 95240

If premise licensed:

Type of license

Transferor's names/license:

NIATA INC 185688

License Type	Transaction Type	Fee Type	Master	Dup	Date	Fee
1. 47 ON-SALE GENERAL EA	PERSON TO PERSON TRANS	P40	YES	0	JAN 13, 1995	\$1250.00 :
2. 47 ON-SALE GENERAL EA	ANNUAL FEE	P40	YES	0	JAN 13, 1995	\$695.00 :
3. 47 ON-SALE GENERAL EA	PREMISE TO PREMISE TRA	P40	YES	0	JAN 13, 1995	\$100.00 :
4. NA NO LICENSE TYPE	STATE FINGERPRINTS	NA	YES	0	JAN 13, 1995	\$117.00 :
TOTAL						\$2162.00

Have you ever been
convicted of a felony? **NO**

Have you ever violated any provisions of the Alcoholic Beverage Control
Control Act, or regulations of the department pertaining to the Act? **NO**

Explain any "Yes" answer to the above questions on an attachment which shall be deemed part of this application.

Applicant agrees (a) that any manager employed in on-sale licensed premise will have all the qualifications of a licensee, and (b) that he will not violate or cause or permit to be violated any of the provisions of the Alcoholic Beverage Control Act.

STATE OF CALIFORNIA

County of **SAN JOAQUIN**Date **JAN 13, 1995**

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is an applicant, or one of the applicants, or an executive officer of the applicant corporation, named in the foregoing application, duly authorized to make this application on its behalf; (2) that he has read the foregoing and knows the contents thereof and that each of the above statements therein made are true; (3) that no person other than the applicant or applicants has any direct or indirect interest in the applicant or applicant's business to be conducted under the license(s) for which this application is made; (4) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety (90) days preceding the day on which the transfer application is filed with the Department or to gain or establish a preference to or for any creditor or transferor or to defraud or injure any creditor of transferor; (5) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

Applicant Name(s)

Applicant Signature(s)

MARLO KERNER & ASSOCIATES INC*William G. Gordon Pres.*

LICENSE ACTION REQUEST

STATE OF CALIFORNIA
DEPARTMENT OF ALCOHOLIC BEVERAGE CONTROL

1. NAME NIATA, INC.	2. LICENSE NUMBER 47-185688
3. DBA The Opera House	4. DISTRICT OFFICE Stockton
5. PREMISES ADDRESS 902 Central, Tracy, CA 95376	6. LICENSE ATTACHED <input type="checkbox"/> Yes <input type="checkbox"/> No

A. APPLICATION TO TRANSFER LICENSE

7. Transfer to: MARLO KERNER & ASSOCIATES, INC. 28 S.SCHOOL ST., LODI

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is the licensee, or an executive officer of the corporate licensee, named in the foregoing transfer application, duly authorized to make this transfer application on its behalf; (2) that he hereby makes application to surrender all interest in the attached license(s) described below and to transfer same to the applicant and/or location indicated on the upper portion of this application form, if such transfer is approved by the Director; (3) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety days preceding the day on which the transfer application is filed with the Department or to gain or establish a preference to or for any creditor of transferor or to defraud or injure any creditor of transferor; (4) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

Name(s) of Licensee(s)	Signature(s) of Licensee(s)	Name(s) of Licensee(s)	Signature(s) of Licensee(s)
a. Niata, Inc.		d.	
b. by: State Board of Equalization		e.	
c.	by: Dennis Lammerding, Tax Compliance Specialist		

B. CANCELLATION

☐ Immediately ☐ Upon Issuance ☐ Other: _____

I voluntarily cancel my license because I am no longer in business. I understand my license cannot be reactivated or reinstated.

8. DATE CLOSED	9. SIGNATURE X	10. DATE	11. HOME TELEPHONE NUMBER ()
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Important Notice to Licensee

All licenses surrendered will be automatically revoked if the renewal fees are not paid. Any change of mailing address shall be reported to the District Office. The surrendered license will be automatically canceled upon transfer to the temporary permittee. If the transfer application is denied or withdrawn:
(a) If the transferor intends to resume operation of the licensed business he must request the return of the surrendered license and establish that there has been no change in the ownership or the qualifications of the licensed premises.
(b) If the transferor does not intend to resume operation of the licensed business and does not request return of the surrendered license then the Department will proceed to hold the license under the provisions of Rule 65. The effective date of Rule 65 surrender will be the date of application, denial, or withdrawal.

C. SURRENDER - Rule 65

☐ Immediately ☐ Upon Issuance ☐ Other: _____

I voluntarily surrender my license for a period of not more than one year. I intend to ☐ Transfer ☐ Reactivate the license. I understand that the license must be renewed at the time renewal fees are due or the license will be automatically revoked. I further understand that the Department will proceed to automatically cancel my license at the expiration of the one-year period if not transferred or reactivated.

12. DATE CLOSED	13. SIGNATURE X	14. DATE	15. HOME TELEPHONE NUMBER ()
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16. MAILING ADDRESS

FOR DEPARTMENT USE ONLY ☐ Premises Abandoned ☐ Letter Attached Requesting Surrender or Cancellation ☐ Other: _____

D. REQUEST FOR SURRENDER OF RETAIL LICENSE FOR TEMPORARY PERMIT

UNDER SECTION 24045.5(b) OF THE ALCOHOLIC BEVERAGE CONTROL ACT

17. TRANSFEREE	18. SURRENDER DATE	19. EFFECTIVE DATE	20. EXPIRATION DATE
21. TRANSFEROR'S SIGNATURE X	22. DATE		

E. REQUEST FOR SURRENDER OF PRIVILEGES ON A PORTION OF THE PREMISES

UNDER RULE 53.

I/we hereby surrender the privileges or my/our alcoholic beverage license in my/our _____
banquet room, dining room, etc.
_____ on _____ date between the hours of _____ and _____.

23. I/We have read the foregoing and know the contents thereof. SIGNATURE X	24. TELEPHONE NUMBER ()	25. DATE
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26. MAILING ADDRESS